

**SOLID WASTE SECTION PERMIT APPLICATION
COMPLIANCE REVIEW REQUEST
AND PERMIT FEE INVOICE REQUEST**

Submit to the Field Operations Branch Head (or Compliance Officer) and to Liz Patterson

Review Requested by: Donna Wilson

Date Requested: 3-7-12

Name of facility and permit number: Halifax County Transfer Station, no permit number yet

Applicant (Owner) Name: Halifax County

Permit request: Application for new MSW transfer station. Requesting new P number. Transfer station is on the same property as the Halifax County CDLF, 4204-CDLF-1998 and the Halifax Coal Ash Landfill, 4204-INDUS-1994.

Permit fee action: new permit \$5,000

Date Application Received: 3-6-12

Contact Name and Title: Ms. Gwen Matthews

Company: Halifax County Dept. Public Utilities

Street Address: P. O. Box 70

City/State/Zip: Halifax, NC 27839

Email: matthewsg@halifaxnc.com

Parent Company: N/A

Known Subsidiaries: N/A

Other known names business has operated under: N/A

Known Counties of Operation: Halifax

Does the applicant have a past or current solid waste permit? Yes ☒ No ☐

If yes, write Facility Type: CDLF, industrial LF and Permit #: 4204-CDLF-1998, 4204-INDUS-1994

Does the applicant have other DENR permits? Yes ☐ No ☐ unknown

If yes, please specify DENR Division unknown Permit Type unknown and Permit # unknown

Did the permit applicant submit Financial Assurance cost estimates? Yes ☐ No ☐ N/a ☒

Are the cost estimates sufficient? Yes ☐ No ☐ N/a ☒

Other notes

Please provide a new P number for this facility. Please confirm that the compliance review requirements for this application have been satisfied.